



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 6258

SERIAL NUMBER 09/997,850	FILING DATE 11/29/2001  RULE	CLASS 600	GROUP ART UNIT 3736	ATTORNEY DOCKET NO. 349.033US3
-----------------------------	---------------------------------------	--------------	------------------------	--------------------------------------

APPLICANTS

Brian P. Brockway, Arden Hills, MN;  
 Perry Alton Mills, Arden Hills, MN;  
 Mel Murray Moench, Howard Lake, MN;

**\*\* CONTINUING DATA \*\*\*\*\***  
 This application is a CON of 09/491,233 01/25/2000 PAT 6,379,308  
 which is a DIV of 08/950,315 10/14/1997 PAT 6,033,366

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **\*\* SMALL ENTITY \*\***  
**\*\* 12/11/2001**

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MN	SHEETS DRAWING 7	TOTAL CLAIMS 34	INDEPENDENT CLAIMS 4
---	--	---------------------------	------------------------	-----------------------	----------------------------

Verified and Acknowledged  
 Examiner's Signature *[Signature]* Initials

ADDRESS  
 20350  
 TOWNSEND AND TOWNSEND AND CREW, LLP  
 TWO EMBARCADERO CENTER  
 EIGHTH FLOOR  
 SAN FRANCISCO , CA  
 94111-3834

TITLE  
 Pressure measurement device

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
------------	---	--

<p>RECEIVED 951</p>	<p>No. _____ for following:</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>1.18 Fees ( Issue )</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other _____</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Credit</td> </tr> </table>	<input type="checkbox"/>	1.18 Fees ( Issue )	<input type="checkbox"/>	Other _____	<input type="checkbox"/>	Credit
<input type="checkbox"/>	1.18 Fees ( Issue )							
<input type="checkbox"/>	Other _____							
<input type="checkbox"/>	Credit							